

73/12/16

COUNTY BOROUGH OF STOCKPORT



EDUCATION COMMITTEE

Annual Report

on the

SCHOOL HEALTH SERVICE

for the

YEAR ENDED 31st DECEMBER, 1954

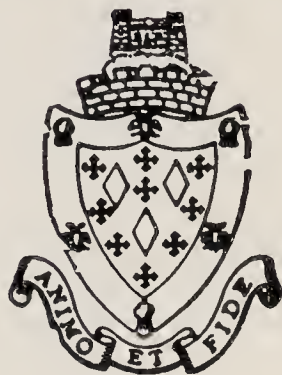
By

J. YULE, M.D., D.P.H.

Principal School Medical Officer

(46th of the Series)

COUNTY BOROUGH OF STOCKPORT



EDUCATION COMMITTEE

Annual Report

on the

SCHOOL HEALTH SERVICE

for the

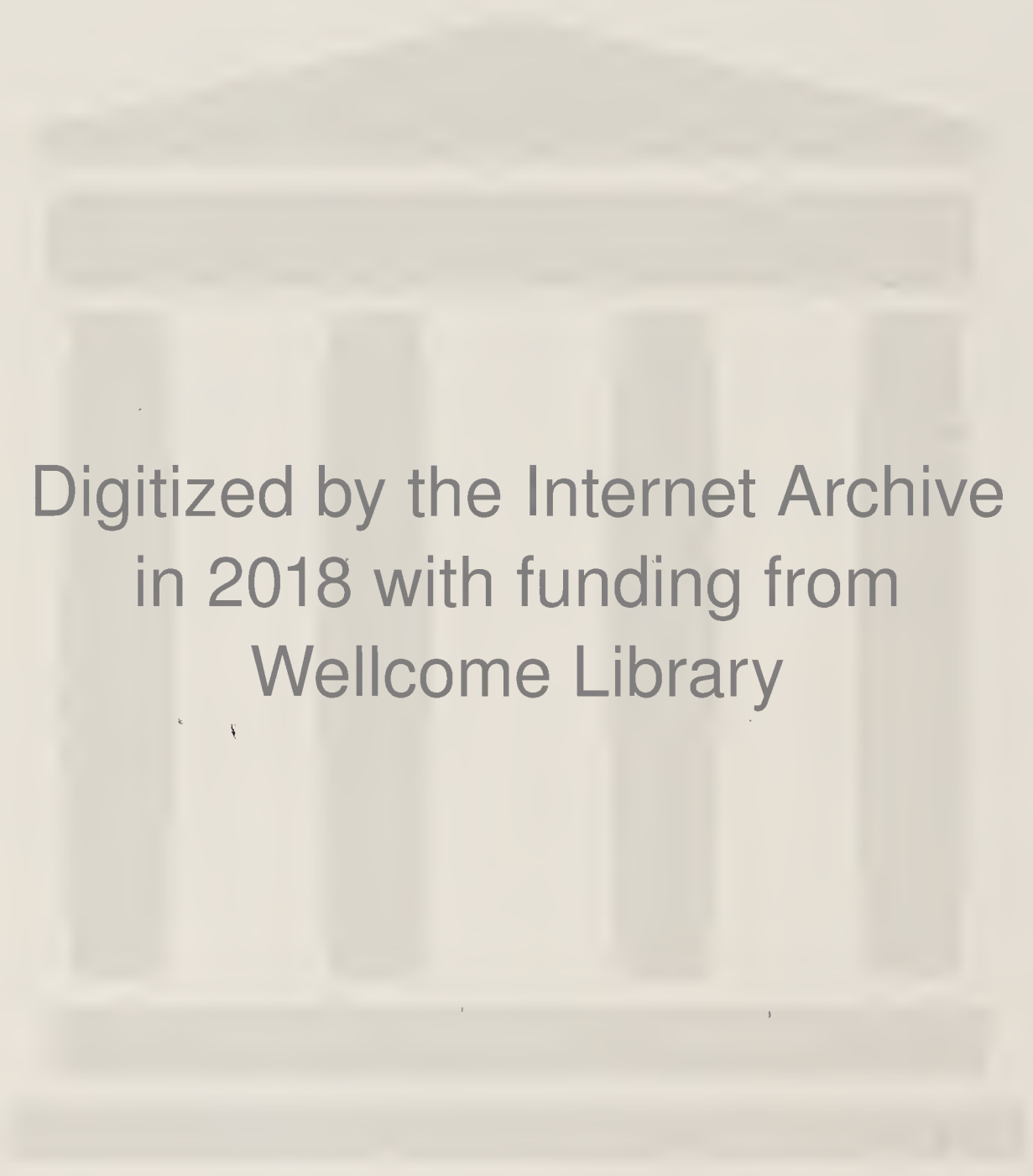
YEAR ENDED 31st DECEMBER, 1954

By

J. YULE, M.D., D.P.H.

Principal School Medical Officer

(46th of the Series)



Digitized by the Internet Archive
in 2018 with funding from
Wellcome Library

<https://archive.org/details/b30137871>

CONTENTS

<i>Section</i>	<i>Pages</i>
— Education Committee.	5
— Welfare and General Purposes Sub-Committee.. ..	5
— Special Schools Sub-Committee	5
— Staff of the School Health Service.	6
— Summary of Work.	7
(a) Medical Officers at Maintained Primary and Secondary Schools	7
(b) Medical Officers at Clinics	7
(c) Dental Officers	7
(d) School Nurses' Visits	7
— General Information.	7
— Introduction.	8-9
I. Staff.	10
(a) General	10
II. Co-ordination.	10-11
(a) General Practitioners	10
(b) Hospitals	10
(c) Health Department	11
III. School Accommodation and Hygiene	11
(a) School Building Programme	11
(b) Sanitary Accommodation	11
(c) Playgrounds	11
IV. Medical Inspection.	11-12
(a) Age Groups Inspected	11
(b) Special Inspections	12
(c) Statistics of Medical Inspection	12
V. Findings of Medical Inspection.	12-13
(a) General Condition of Pupils	12
(b) Infestation with Vermin	13
(c) Dental Defects	13
VI. Infectious Diseases.	13-14
(a) Immunisation against Diphtheria	13
(b) Incidence of Infectious Diseases	14
VII. Following Up.	14
(a) General	14
VIII. Arrangements for Treatment.	15-21
(A) <i>PRE-SCHOOL CHILDREN.</i>	
(a) Attendances	15
(B) <i>SCHOOLCHILDREN.</i>	
(a) Uncleanliness	15
(b) Minor Ailments and Diseases of the Skin	15-16
(c) Visual Defects and External Eye Diseases	16
(d) Ear, Nose and Throat Defects	17
(e) Dental Defects—Report of the Chief Dental Officer	17-19
(f) Orthopædic and Postural Defects	19
(g) Heart Disease and Rheumatism	19
(h) Enuresis	20
(i) Chiropody	20
(j) Speech Therapy	20-21

<i>Section</i>	<i>Pages</i>
IX. Provision of Meals and Milk.	21–22
(a) School Meals Service	21
(b) Milk in Schools Scheme	21–22
X. Open Air Education.	22
(a) The Longfield Open Air School	22
XI. Physical Education.	22–23
(a) Physical Activity	22
(b) Remedial Training	23
(c) Swimming	23
(d) Open Air Activities	23
XII. Co-operation of Parents, Teachers, School Attendance Officers and Voluntary Bodies.	23–25
(a) Co-operation of Parents	23–24
(b) Co-operation of Teachers	24
(c) Co-operation of School Attendance Officers	24
(d) Co-operation of Voluntary Bodies	25
XIII. Blind, Deaf, Defective and Epileptic Children.	25–28
(a) Examinations of Children for a Disability of Mind as Prescribed by Regulation 2(a) of the Reports to Local Authorities (Records) Regulations, 1945	25–26
(b) Admissions to Special Residential Schools and Hospitals	27–28
XIV. Full-time Courses of Secondary Education for Blind, Deaf, Defective and Epileptic Students.	28
(a) General	28
XV. Special Schools.	28–29
(a) Longfield Open-Air School	28
(b) Taxal Lodge Special Residential School	29
(c) Special Class at St. Peter's C.E. School	29
XVI. Nursery Schools.	29
XVII. High Schools and Other Institutions of Secondary Education.	29–30
(a) Medical Inspection	29
(b) Dental Inspection	30
(c) Following Up and Medical Treatment	30
XVIII. Miscellaneous.	30
(a) Youth Employment Bureau and the School Health Service	30
(b) Medical Examination of Entrants to Courses of Training for Teaching and to the Teaching Profession	30
XIX. Statistical Tables.	33–38
(a) Table I.—Medical Inspection of Pupils attending Maintained Primary and Secondary Schools	33
(b) Table II.—	
(i) Return of Defects found by Medical Inspections	34
(ii) Classification of the General Condition of Pupils Inspected	35
(c) Table III.—Infestation with Vermin	35
(d) Table IV.—Treatment	36–37
(e) Table V.—Dental Inspection and Treatment	38

STOCKPORT EDUCATION COMMITTEE

at 31st December, 1954

Chairman : Alderman A. M. Watson, J.P.

Vice-Chairman : Alderman W. R. Fox, J.P.

Aldermen C. H. P. Cooper, J.P., T. C. Edwards, T. S. Fish, H. Patten, O.B.E., M.A., J.P., J. Pell, J. Randles, B.A.

Councillors S. Boyle, J. Burke, J. Curley, W. Durr, Mrs. C. S. Grant, M. L. Hall, LL.B., H. Hope, W. C. Knight, Mrs. E. Little, T. Orchardson, R. Seaton, Mrs. M. White, Mrs. U. I. White, A. Whitesmith, A. Whitley, A. Wood.

Mrs. J. E. Parkinson, Miss M. Orchardson.

Messrs. H. Barlow, Canon B. Bell, P.P., W. Garside, R. Heys, H. Sidebotham, LL.M., J. S. Southworth, J. Sowden, M. E. J. Swain, B.Sc., T. C. Williams, M.Sc., Rev. J. Yelder, F.Ph.S.

WELFARE AND GENERAL PURPOSES SUB-COMMITTEE

Chairman : Alderman A. M. Watson, J.P.

Vice-Chairman : Alderman W. R. Fox, J.P.

Aldermen C. H. P. Cooper, J.P., T. C. Edwards, T. S. Fish, H. Patten, O.B.E., M.A., J.P., J. Randles, B.A.

Councillors S. Boyle, J. Curley, Mrs. C. S. Grant, H. Hope, W. C. Knight, Mrs. E. Little, T. Orchardson, R. Seaton, Mrs. M. White, A. Whitley, A. Wood.

Mrs. J. E. Parkinson

Messrs. W. Garside, R. Heys, Rev. J. Yelder, F.Ph.S.

SPECIAL SCHOOLS SUB-COMMITTEE

Chairman : Councillor Mrs. E. Little

Vice-Chairman : Councillor Mrs. M. White

Aldermen W. R. Fox, J.P., H. Patten, O.B.E., M.A., J.P., J. Randles, B.A., A. M. Watson, J.P.

Councillors J. Burke, W. Durr, Mrs. C. S. Grant, W. C. Knight, Mrs. U. I. White, A. Whitley.

Miss M. Orchardson, M. E. J. Swain, B.Sc.

DIRECTOR OF EDUCATION
E. Gwyn Thomas, B.A., Ph.D.

STAFF OF THE SCHOOL HEALTH SERVICE

Principal School Medical Officer : J. Yule, M.D., Ch.B., D.P.H.

Deputy Principal School Medical Officer :

A. R. M. Moir, M.D., Ch.B., D.P.H. (commenced 15th September, 1954)

Senior School Medical Officer :

W. F. Christian, M.B., Ch.B., D.P.H. (resigned 9th March, 1954)

School Medical Officers :

Hilary J. Crewe, M.B., Ch.B.

Stella M. Jones, B.A., M.B., B.Ch., B.A.O.

E. P. Jones, M.B., B.Ch., B.A.O. (commenced 20th September, 1954)

Consultant Ophthalmic Surgeon :

S. H. Faulkner, M.D., M.R.C.P., D.O.M. & S.

Consultant Aural Surgeon : G. E. Archer, M.B., D.L.O., F.R.C.S.E.

Chief Dental Officer : Freda Sellers, L.D.S.

Full Time Dental Officers :

J. H. Howarth, B.D.S., L.D.S. (resigned 3rd April, 1954)

M. A. Sellers, L.D.S.

(commenced 4th January, 1954, resigned 1st April, 1954)

Part Time Dental Officers :

B. Reynolds, L.D.S.

(commenced 18th January, 1954, resigned 20th August, 1954)

F. M. Mears, L.D.S., R.F.P.S. (commenced 12th April, 1954)

K. Clark, B.D.S., L.D.S. (commenced 18th October, 1954)

Superintendent of School Nurses : Miss Snowden, S.R.N., S.C.M.

School Nurses :

Mrs. Turner, S.R.N.

Mrs. Seed, S.R.N.

Mrs. Moore, S.R.N.

Mrs. Rayner, S.R.N., S.C.M., H.V.Cert. (transferred to Health Department, 2nd August, 1954).

Miss Faulkner, S.R.N.

Mrs. Stevenson, S.R.N.

Mrs. Gething, S.R.N.

Miss Sankey, S.R.N. (commenced 19th July, 1954, resigned 18th December, 1954).

Mrs. Herbert, S.R.N., S.C.M. (resigned June, 1954).

Mrs. Faulkner, S.R.N. (commenced 6th September, 1954).

Chiropodist : J. F. Green, F.Ch.S.

Senior Clerk : H. Joules.

Clerical Staff :

Miss Moulton.

Miss Henshaw.

Miss Rimmer.

Miss Miller.

Miss Harris.

Miss Matthewman.

Miss Liptrot (resigned 30th July, 1954).

Miss Moss (commenced 25th October, 1954).

SUMMARY OF WORK

A.	Medical Officers at Maintained Primary and Secondary Schools :—	1953	1954
	Periodic Inspections at Primary Schools ..	6,288	6,311
	Special " " " " " " ..	220	72
	Re-Inspections at Primary Schools ..	4,239	3,598
	Periodic Inspections at Secondary Schools ..	1,105	1,427
	Special " " " " " " ..	152	129
	Re-Inspections at Secondary Schools ..	1,214	1,105
B.	Medical Officers at Clinics :—		
	Inspections at Clinics	5,474	5,215
	Re-Inspections at Clinics	4,706	3,744
	Inspections under Employment of Children Bye-Laws	381	363
	Entertainments Certificates issued	5	2
C.	Dental Officers :—		
	Periodic Inspections at Primary Schools ..	9,273	11,253
	Periodic Inspections at Secondary Schools ..	—	4,872
	Special Inspections at Schools and Clinics ..	2,304	2,148
	Attendances for Treatment	9,585	11,010
D.	School Nurses' Visits, etc.:—		
	Visits to Schools	1,625	1,569
	Examinations in Schools (including cleanliness inspections)	98,058	91,017
	Visits to Homes	1,044	686

COUNTY BOROUGH OF STOCKPORT

General Information

	1953	1954
Population	141,810	141,660
Primary Schools—		
Number of Schools	37	38
Number of Departments	55	56
Number on Rolls	14,765	15,303
Schools for Secondary Education—		
Girls	3	3
Boys	2	2
Mixed	6	6
Number on Rolls	5,393	5,638
Special Schools—		
Longfield Open-Air School Number on Roll	92	91
Taxal Lodge Residential School for Educationally Subnormal Pupils Number on Roll	45	42
Cost of School Health Service—	1952/53	1953/54
Total Cost (<i>Net</i>)	£18,800	£19,575
Government Grant	£11,280	£11,745
Cost to Rates	£7,520	£7,830
Product of a Penny Rate	£3,783	£3,876
Cost in Terms of a Penny Rate	1.988d.	2.020d.

SCHOOL HEALTH REPORT

*To the Chairman and Members of the Education Committee
of the County Borough of Stockport*

Mr. Chairman, Ladies and Gentlemen,

I have the honour to submit to you my Twentieth Annual Report as Principal School Medical Officer, which is the 46th of the Series.

Since 1945, that is the post war period, there has been a gradual improvement in the general nutritional state of the schoolchildren of the town. There is no doubt that school meals and milk in schools has played an important contributory part in attaining this satisfactory result. There has also been a gradual improvement in the standard of cleanliness in the post war years. It will be noted that as a result of 21,032 examinations by the school nurses of children in schools, only 1,472 pupils were found to have a degree of infestation, and only in nine cases was it considered necessary to serve a cleansing notice on the parents.

Diphtheria immunisation is still being undertaken by school visitation and 94.58 per cent of the children attending schools have been immunised. It is gratifying to report that no notification of diphtheria has been received during the past five years.

The record of incidence of infectious disease shows an improvement on that of 1953 and it is satisfactory to report that there was no case of poliomyelitis in school children during the year.

During 1954, B.C.G. vaccination was offered to all children within the 13 year old age group and this has continued within the present year. It is hoped that this policy, continued over the years will lead to diminution of the incidence of tuberculosis amongst adolescents. In addition, we are keeping under review, a group of school-leavers from modern secondary schools who were vaccinated in 1951 as part of an investigation by the Medical Research Council.

It will be noted that considerable attention has been devoted to the examination and classification of handicapped children of all categories. Out of a total of 21,032 school children, 260 children physically or mentally handicapped, are receiving special educational treatment—137 attending special day schools, 97 special residential schools, 14 are in hospital special schools, and 12 are receiving home tuition.

The increase in the number of sessions devoted to eye work by the Ophthalmic Surgeon has resulted in the refraction of 979 children as compared with 790 in 1953.

The reduction in the number of sessions by the Ear, Nose and Throat Specialist, from two per week to one per week has resulted in only 380 children having operations for removal of tonsils and adenoids compared with 522 in 1953.

It will be noted that there is still difficulty in obtaining an adequate staff of dental surgeons. The establishment is one senior dental officer and three school dental officers, but for the most of 1954, the staff consisted of one senior dental officer and two part-time dental officers, giving the equivalent of two full-time dental officers. In spite of these difficulties, it will be observed that there has been an increase both in the number of inspections and in the attendances for treatment.

The Speech Therapy Clinic which was established last year has continued to do very valuable work.

The Regional Hospital Board has now agreed to make available the services of a Consultant Child Psychiatrist for one session per week, and it is hoped to establish a full child guidance service at Heaton Moor Clinic at an early date.

The Mass Miniature Radiography Service have assisted with the medical examination of school teachers, entrants to training college and canteen staffs, and I wish to acknowledge their help.

The Audiometric Clinic has proved most useful and this year another portable audiometer has been purchased, to be employed in the routine investigation of all children who are aged seven years. A member of the staff has undergone training at Manchester University Department for the Deaf, and is now competent in the use of this instrument. It is hoped by the use of these audiometric tests at this particular age to make certain that children with any defect of hearing are offered appropriate help with their handicap.

Dr. W. F. Christian resigned his appointment as Senior School Medical Officer in March, 1954, and Dr. A. R. M. Moir was appointed Deputy Principal School Medical Officer on the 15th September, 1954. This is an important and valuable step in the general integration of the Health Services of the town.

A special tribute should be paid in this introduction to the encouragement and help which the staff of the School Health Service has received throughout the year from the Teaching Staffs of the Schools.

The Director of Education, Dr. Gwyn Thomas, and his Staff have provided information for inclusion in this Report, and I desire to thank him for this and much consideration and help in connection with this special branch of the Education Committee's work during the year.

I wish to place on record my thanks to all Members of the Staff for their loyal service and response to all demands which have been made on them.

Finally, I should like to express my sincere appreciation of the courtesy and consideration which has been shown by you, Mr. Chairman, Ladies and Gentlemen, to the members of the School Health Service throughout the year.

I have the honour to remain,

Your obedient Servant,

J. YULE,

Principal School Medical Officer.

*Town Hall,
Stockport.
May, 1955.*

REPORT

I.—STAFF.

(a) General.

Dr. A. R. M. Moir, M.D., Ch.B., D.P.H., assumed his appointment as Deputy Principal School Medical Officer on 15th September, 1954.

Dr. W. F. Christian, M.B., Ch.B., D.P.H., resigned his appointment as Senior School Medical Officer on 9th March, 1954.

Dr. E. P. Jones, M.B., B.Ch., B.A.O., assumed his appointment as School Medical Officer on 20th September, 1954.

Mr. J. H. Howarth, B.D.S., L.D.S., resigned his appointment as full-time Dental Officer on 3rd April, 1954.

Mr. M. A. Sellers, L.D.S., assumed his appointment as full-time Dental Officer on 4th January, 1954, and resigned on 1st April, 1954.

Mr. B. Reynolds, L.D.S., assumed his appointment as part-time Dental Officer on 18th January, 1954, and resigned on 20th August, 1954.

Mrs. F. M. Mears, L.D.S., R.F.P.S., assumed her appointment as part-time Dental Officer on 12th April, 1954.

Mr. K. Clark, B.D.S., L.D.S., assumed his appointment as part-time Dental Officer on 18th October, 1954.

Nurse Rayner, S.R.N., S.C.M., H.V.Cert., transferred to the Health Department on 2nd August, 1954.

Miss Sankey, S.R.N., assumed her appointment as School Nurse on 19th July, 1954, and resigned on 18th December, 1954.

Mrs. Faulkner, S.R.N., assumed her appointment as School Nurse on 6th September, 1954.

Miss Moss assumed her appointment as Medical Clerk on 25th October, 1954.

Miss Liptrot resigned her appointment as Dental Attendant on 30th July, 1954.

II.—CO-ORDINATION.

(a) With General Practitioners.

Satisfactory liaison has continued with many practitioners in the town. From these doctors information is received from time to time about handicapped children under their care for whom the facilities offered by the School Health Service are requested. Many of the children who attend the Aural Clinic and the Eye Clinic are referred at the request of general practitioners.

(b) With Hospitals.

The arrangements outlined in last year's Annual Report have continued to operate satisfactorily, whereby medical reports on children who have attended the Out Patients' Department of the Stockport Infirmary or who have been in-patients at Stepping Hill Hospital or at the Infirmary, are sent to the Principal School Medical Officer. The visiting Specialists who conduct the Eye Clinics and Ear, Nose and Throat Clinics which are held at the Central School Clinic, are also on the staff of the local hospitals ; thus continuity of supervision is ensured.

(c) With the Health Department.

Information concerning children entering school for the first time is supplied by the Health Department from the Health Visitors' records of home visits and clinic attendances. Miss Snowdon, S.R.N., S.C.M., continues as the Superintendent of the combined Health Department and School Health Department Nursing Staff

**THE SCHOOL HEALTH SERVICE IN RELATION
TO PRIMARY AND SECONDARY SCHOOLS****III.—SCHOOL ACCOMMODATION AND HYGIENE.**

I am indebted to Dr. E. Gwyn Thomas, Director of Education, for the following information :—

(a) School Building Programme.

During the calendar year, a new school to accommodate 320 pupils was completed on the Brinnington Housing Estate, and opened in September, 1954. Work proceeds on the new Offerton Secondary School for Girls, and work has started on the erection of the new St. Michael's Roman Catholic Secondary School in Nangreave Road.

At Taxal Lodge Residential School, Whaley Bridge, a fireproof staircase has been installed and a changing room provided alongside the showers.

(b) Sanitary Accommodation.

Hot water installations have been provided at Hollywood Park, Vernon Park and Wellington Road Primary Schools, and staff lavatories at Stockport School have been improved.

(c) Playgrounds.

Improvements to playground surfaces have been carried out at St. Mary's R.C. and St. Joseph's (Reddish) R.C. Schools, and at St. John's C.E., St. Mary's C.E., Offerton C.E., Hope Memorial C.E. and Parish Church of England Schools.

IV.—MEDICAL INSPECTION.**(a) Age Groups Inspected.**

The medical inspection of pupils has continued as in previous years, the age groups inspected being :—School Entrants ; Leavers from the Primary School ; and Leavers from the Secondary School. In addition, pupils reaching the age of 8 years during the current year were also examined.

(b) Special Inspections.

Examinations of children made by Medical Officers in the following circumstances are known as Special Inspections. The total number of special inspections carried out and the number of children examined in each group are shown below.

(i) Children attending the Consultation Clinics ..	4,804
(ii) Children specially examined at school at the request of the parent or Head Teacher	201
(iii) Children examined for convalescence	48
(iv) Children examined for employment out of school hours	363
TOTAL	5,416

Details of the defects requiring treatment or observation which were discovered at these inspections are shown in Table II on page 34.

(c) Statistics of Medical Inspection.

The Statistical Tables relating to the Medical Inspections carried out during the year are shown on page 33. The number of Periodic Inspections carried out during the year was 7,738, compared with 7,393 last year. The number of Special Inspections was 201 and the number of re-inspections was 4,703 during the year. This compares with 372 Special Inspections and 5,453 Re-inspections last year. It should be noted that these figures indicate all cases examined in maintained primary and secondary schools.

The number of visits to schools by School Medical Officers for the purpose of carrying out Periodic Medical Inspections was 502 as compared with 536 in 1953.

V.—FINDINGS OF MEDICAL INSPECTION.

The detailed figures relating to the defects found at the Medical Inspections will be found in Table II, page 34.

(a) General Condition of Pupils.

The General Condition of the pupils medically examined at school during the year was as follows :—

General Condition A (Good)—20.92 per cent

General Condition B (Fair)—77.95 per cent

General Condition C (Poor)—1.13 per cent

Children whose general condition is poor are kept under regular supervision by the School Medical Officers, and when considered necessary are referred for a convalescent holiday, for admission to the Open Air School, or for a course of ultra violet light, whichever is likely to benefit them most. All children suffering from malnutrition are eligible for an extra third of a pint of milk per day and for “ free meals ” if the income of the parents falls below a certain level fixed by the Local Education Authority.

(b) Infestation with Vermin.

The School Nurses continue to pay regular visits to the schools to examine children for the presence of infestation. This year 82,875 inspections of pupils were made as compared with 98,058 inspections in 1953. Out of a total of 21,032 on the rolls 1,472 individual children were found to be unclean or 6.99 per cent of the children on the rolls. In 1953 9.33 per cent of the children on the rolls were found to be unclean. Although these figures are an improvement on those for 1947 when more frequent cleanliness inspections were started, there is still considerable room for improvement. The nursing staff is handicapped in that it has no power to cleanse those members of the household who are not of school age and consequently it is not possible to deal with the source of infestation.

The statistical tables relating to this subject will be found on page 35 of this Report.

(c) Dental Defects.

A perusal of Table V, page 38, shows that the Dental Officers devoted 94 half-days to inspections and inspected 16,125 pupils. In addition 2,148 Specials were inspected.

VI.—INFECTIOUS DISEASES.**(a) Immunisation Against Diphtheria—1954.**

During the year, immunisation of children of school age has continued to be satisfactory. The total number of children of the ages 5—15 years inclusive, completely immunised was 2,875 (including 2,454 children also immunised in previous years).

It is most gratifying to report that the number (20,419) of children of school age (5—15 years) immunised up to the end of December, 1954, was 94.58 per cent. of the children of these age groups in the Borough.

There were no cases of Diphtheria occurring during the year amongst the 21,589 children comprising the school population. This figure includes 557 Grammar School pupils.

Immunisation at Welfare Centres :

Number of children who received 2nd and final injection (including 395 re-inforcing injections) ..	765
--	-----

Immunisation at Schools :

Number of children who received 2nd and final injections (including 2,017 re-inforcing injections) ..	2,017
Number of Schools visited	44
Number of times visited	44

Immunisation by Private Doctors :

Number of completed injections (including 42 re-inforcing injections)	93
---	----

(b) Incidence of Infectious Diseases.

Disease	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total 1954	Total 1953
Scarlet Fever	31	26	10	24	91	224
Diphtheria	—	—	—	—	—	—
Dysentery	—	1	—	1	2	7
Pneumonia	1	2	1	2	6	9
Meningo-coccal infections	—	1	1	2	4	4
Measles	—	38	117	144	299	557
Whooping Cough	23	79	15	13	130	76
Poliomyelitis	—	—	—	—	—	—
Food Poisoning	—	2	—	5	7	7
Typhoid (Para. B)	—	—	—	—	—	—
Erysipelas	—	—	—	—	—	2

For the fifth year in succession there were no cases of Diphtheria in children of school age.

The number of Scarlet Fever cases showed a decrease of 133 from that of the previous year.

There were 299 cases of Measles as compared with 557 in 1953.

The number of cases of Whooping Cough notified during the year was 130 as compared with 76 in 1953.

There were no cases of Poliomyelitis in children of school age during the year.

VII.—FOLLOWING-UP.**(a) General.**

The children who are found at the periodic medical inspections to have defects requiring treatment or observation are followed up by the School Medical Officers at their subsequent visits to the schools. The Head Teachers of the schools and the School Nurses are informed of the names of those children who require to be followed up and are therefore able to ascertain whether the recommendations made have been implemented. In those cases where the recommendations are not being carried out through default on the part of the parents, the School Nurses visit the homes of the children to discuss the matter with the parents. In this connection the number of visits to the schools during the year was 304 and the number of home visits was 278.

I would like to take this opportunity to thank all Head Teachers for their co-operation in ensuring that our school children receive the attention they need, and that defects are not neglected.

VIII.—ARRANGEMENTS FOR TREATMENT.

(A)—*PRE-SCHOOL CHILDREN*.(a) **Attendances.**

(i) Minor Ailment Clinic (Skin defects and miscellaneous cases)	189
(ii) Eye Clinic	
Refractions	60
(iii) Dental Clinic	412

(B)—*SCHOOL CHILDREN*.(a) **Uncleanliness.**

The removal of lice and nits from the hair of infested children is primarily the responsibility of the parents. When infestation is found by the School Nurse, the parents of the infested children are informed and asked to cleanse the children forthwith. Only when the parents have failed, after repeated requests, to carry out the cleansing satisfactorily, are the children cleansed compulsorily at one of the School Clinics. In a large proportion of the cases seen, the parents do make an effort to comply with the requests of the School Nurses, and are prepared to bring their children to the Clinic, if necessary, for cleansing to be carried out under supervision. However there remains a hard core of difficult cases who are impervious to persuasion, and for these there appears to be no alternative but to carry out the cleansing compulsorily. During the year 40 attendances were made at the Store Street Centre.

During the year 1,265 visits were made to the schools by the School Nurses to examine children for uncleanliness.

(b) **Minor Ailments and Diseases of the Skin.**

(i) Consultation and Minor Ailment Clinics.

Doctors' consultations are held at the following Clinics and the School Nurses carry out treatment for minor ailments at the following times.

The Minor Ailments Clinic at 108, Wellington Road South, is open daily and one of the School Medical Officers is in attendance on Monday mornings, Tuesday afternoons, Wednesday mornings, Thursday mornings, Friday afternoons and Saturday mornings.

The Minor Ailments Clinic at the Reddish Welfare Centre, Stanhope Street, Reddish, is open on Wednesday mornings and Thursday afternoons. A School Medical Officer is in attendance on Wednesday mornings.

The Minor Ailments Clinic at 32, Heaton Moor Road, is open each day from 9.0 a.m. to 10.30 a.m. for the treatment of minor ailments. A School Medical Officer visits this Clinic each Monday and Thursday morning.

Attendances at the Minor Ailments Clinics :—
(including doctors' consultations)

	1953	1954
Number of New Cases seen during the year	4,767	4,405
Total number of attendances during the year	18,816	17,165

It is clear from these figures that many parents continue to seek advice and treatment for their children at the School Clinics although they are presumably registered with a general practitioner under the National Health Service.

(ii) Scabies Clinic.

The treatment of scabies in both children and adults continues to be carried out at St. Saviour's First Aid Post, Great Moor. The treatment consists of a hot bath followed by the application of benzyl benzoate lotion. When infestation is severe all members of the household are invited to attend and receive the necessary treatment ; in addition all clothing and bedding is removed from the house for stoving. There has been a steady fall in the incidence of scabies throughout the country since the end of the war ; severe cases with septic sores are not often seen. In Stockport the number of school children who attended for treatment during the year was 8.

(c) Visual Defects and External Eye Diseases.

(i) Ophthalmic Clinic.

The visiting ophthalmologists attended at the Central School Clinic each week to examine children referred to the Clinic. In addition to examining children for defective vision, the visiting Specialists advise on the treatment of external eye diseases and certify cases of blindness and partial sightedness among school children.

Details of the work done at this Clinic are given below.

Total number of cases refracted at the Ophthalmic Clinics	..	979
Number of cases in which spectacles were prescribed	... ..	486
Number of cases in which spectacles were obtained	.. ..	427

Of the cases refracted at the Ophthalmic Clinics, sixty were pre-school children.

External eye diseases are treated at the Minor Ailments Clinic. Severe cases are referred to their own doctor and are excluded from school. In urgent cases children are referred direct to Stockport Infirmary.

All those children who are prescribed glasses at the School Eye Clinic are seen subsequently at school by the school nurses to ascertain whether the glasses prescribed have been obtained. This is more satisfactory than writing to the Head Teachers of the schools for the information and does not take up a great deal of the nurses time as the information is usually obtained at the time the nurses visit the schools for cleanliness inspections.

(ii) Orthoptic Clinic.

This Clinic is held at Stepping Hill Hospital and is administered by the Regional Hospital Board.

The number of school children referred from the school Eye Clinic to this Clinic during the year was 84.

(d) Ear, Nose and Throat Defects.**(i) Ear, Nose and Throat Clinic.**

Children are seen by appointment at this Clinic. Medical Officers from the Ear, Nose and Throat Department of the Infirmary visit on Friday afternoons each week to examine the children referred to the Clinic. A daily treatment clinic is held for those children who have been ordered treatment by the medical officers. The waiting list for this Clinic has grown considerably since the number of weekly sessions was reduced to one. Children recommended for operative treatment are admitted to Stepping Hill Hospital.

The number of treatments carried out by the nurses at the Central School Clinic in this connection numbered 1,428. The number of children who received operative treatment for enlarged Tonsils and Adenoids during the year was 380. Of these 302 were operated on at Stepping Hill Hospital and 78 at Stockport Infirmary. The number of children operated on for other conditions of the Ear, Nose and Throat was 73. The waiting period for operation at Stepping Hill Hospital was approximately eight weeks.

(ii) Audiometric Clinic.

During the year 152 children were tested on the Pure Tone Audiometer by the School Nurses who have been trained in the use of the instrument. This instrument enables the type and degree of deafness to be accurately determined.

(e) Dental Defects.**The Report of the Chief Dental Officer : Miss F. Sellers, L.D.S.****(i) The School Dental Clinic.**

The School Dental Service in Stockport has a Central Clinic, 108, Wellington Road South, which serves the South side of the town, and a branch clinic at 32, Heaton Moor Road, for the North side. There are two well equipped surgeries, waiting room, and recovery room at each Clinic.

A new branch clinic will be opened shortly on the new housing estate at Brinnington, and this will have one dental surgery, waiting room and recovery room.

(ii) Staffing.

The establishment is one Chief Dental Officer and three full-time Assistants. In 1954, the staff consisted of one Chief Dental Officer for the whole of the year, and two full-time Assistants for the first three months, when one of these entered H.M. Forces and the other private practise.

Part-time Dental Officers were appointed in 1954, for the first time, one in January, and another in April, to work five sessions each, giving the equivalent of one full-time Dental Officer. The employment of part-time Dental Officers was found to work smoothly, and has solved the difficulty of being unable to obtain full-time staff, and enabled a large amount of routine work to be completed.

(iii) School Inspections.

School Inspections this year were carried out by the Chief Dental Officer, and then the routine surgery work was allocated to the part-time staff. Although the staff was below establishment, the School Inspections

show an increase over 1953, and 16,000 children were seen at school and 2,000 casuals at the Clinic.

It is found that if a school is inspected and the children are sent for treatment immediately, the attendance at the Dental Clinics is much better than if there is a lapse before treatment is commenced, and this policy has been carried out. At each inspection the parents of all children with dental defects are notified, and asked to state their preference for private or clinic treatment. Consent for a general anæsthetic, if the dental surgeon considers it is necessary, is obtained at the same time.

All children in Special Schools had at least one dental inspection during the year, to ensure that the condition of their teeth would not be detrimental to an improvement in their general health.

All Schools for Secondary Education had a dental inspection to try to encourage the older age groups to look after their teeth, and have dental treatment before leaving school, but many children did not avail themselves of the opportunity.

(iv) Three Monthly Inspections.

A three monthly dental inspection is necessary to ensure that children's teeth are kept in good condition as caries spreads rapidly when once it starts, and the benefit of conservation work already carried out tends to be lost. There are now a large number of children who attend every three months for inspection and treatment if necessary.

(v) Casuals.

Special times were kept at both Clinics for "casuals" when children without an appointment could attend for advice and treatment. These children bring with them special cards giving their parents written consent. It is surprising how many of these "casuals" are children whose parents at the schools inspection expressed a desire to have the work carried out by a private dentist, but did not make an appointment and sought clinic treatment when the child was in pain.

(vi) Extractions.

841 general anæsthetics were given by a Specialist anæsthetist, and 2,885 local anæsthetics by the dental officers for the extraction of 1,600 permanent and 5,701 temporary teeth.

(vii) Conservation Work.

The aim throughout the year was to do as much conservation work as possible, and an attempt was again made to interest the parents so that they might encourage their children to save their teeth rather than wait until extraction was unavoidable. Too many of the parents are still prejudiced against fillings, and refuse to have their children's permanent teeth filled. 4,147 fillings in permanent teeth and 2,289 in temporary teeth were completed in 1954.

(viii) X-rays.

X-ray facilities were provided at the two local hospitals in the town.

(ix) Orthodontic Work.

All orthodontic cases were referred to the Chief Dental Officer for the necessary treatment. 174 impressions were taken, 99 orthodontic appliances were made and inserted. 683 children attended for inspection and adjustment of their appliances.

(x) Partial Dentures.

12 Partial dentures were inserted for the school children, the mechanical work being sent out to a laboratory.

(xi) Pre-School Children.

A great demand has again been made on the dental service for the pre school child, due to the fact that children are regularly inspected each year at the Infant Welfare Clinics, and if dental defects are discovered, these children are referred to the School Dental Service after they have failed to make arrangements with their own private dental practitioner. This means that much dental defect is being cared for before children start school, and more children are being brought forward for conservation treatment than in the past.

283 pre school children made 412 attendances for dental treatment during 1954. 240 teeth were filled for these "under fives." 88 general anæsthetics and 40 local anæsthetics were given for the extraction of 283 teeth.

(xii) Expectant and Nursing Mothers.

Good liaison and co-operation exists between the ante-natal service and the school dental service, but before any expectant or nursing mother is referred to the school dental service she must have indicated that she did not intend to seek treatment from a private dental practitioner.

During 1954, 86 mothers made 277 attendances for dental treatment, and the following work was carried out :—

Number of teeth filled	54
Number of general anæsthetics administered	32
Number of local anæsthetics administered	39
Number of teeth extracted	459
Number of full dentures inserted	31
Number of partial dentures inserted	10

Table V on page 38 gives details of the School Inspections and routine dental treatment.

(f) Orthopædic and Postural Defects.

Arrangements have been made in some schools for children found by the School Medical Officers to have postural defects, to have regular weekly or twice weekly remedial exercises under the direction of a trained teacher. In addition, use of the modern apparatus installed in many schools during the past year will help to reduce the incidence of postural defects. Children suffering from the severer types of postural defect and from other orthopædic conditions are referred to the Consultant Orthopædic Surgeon at the Stockport Infirmary.

The number of children referred to hospital for treatment during the year was 39. The number of children with severe orthopædic defects admitted to the Children's Orthopædic Hospital, Marple, was 16.

(g) Heart Disease and Rheumatism.

A Heart Clinic is held at the Central School Clinic approximately once per month, the children attending the Clinic by appointment. Children who have suffered from rheumatic fever and children with other types of valvular lesion are kept under supervision at this Clinic.

During the year 107 attendances were made.

(h) Enuresis.

The purpose of this Clinic is to give advice to parents on the management of the troublesome problem of bedwetting, and where necessary to prescribe medicine. In most cases the cause of the condition is faulty management of the early training of the child, but a certain number have an organic cause. These are referred to hospital for the necessary treatment to be carried out.

During the year 292 attendances were made.

(i) Chiropody.

Number of attendances by the Chiropodist	..	..	..	100
„ „ treatments	..	..	..	1,062
„ „ new patients	..	..	..	226
„ „ cases of Verrucæ	..	..	..	87
„ „ „ „ corns	..	..	..	41
„ „ „ „ contracted or overlapping toes	..	..	..	9
„ „ „ „ ingrowing toenails	..	..	..	6
„ „ „ „ other conditions (flat feet, bursæ metatarsalgia, heloma miliares, onychogryphosis, etc.)	..	..	..	83

The introduction of a new method of treatment for Verrucæ has reduced the number of treatments necessary to clear up this particular condition by more than 50 per cent.

The customary re-inspections have been carried out and the full co-operation of the children and their parents has been received.

(j) Speech Therapy.**The Report of the Speech Therapist : Miss D. E. Lees.**

I present herewith, my second annual report. This is the first complete year's work I have submitted and it covers all the statistics of children referred for and receiving speech therapy in 1954. The speech clinics are held at the Central School Clinic, Wellington Road South, and the Branch School Clinic, Heaton Moor Road. As I spend two out of 11 sessions a week at the former clinic, many of the children living in central and South Stockport are having to attend the Heaton Moor Clinic for treatment and they, naturally therefore, form the largest group of poor attenders.

I intend to open a clinic in the St. Petersgate special class, in January, 1955, which will help to relieve the pressure at the central clinic.

Eventually, I hope to establish clinics in South Stockport, the Portwood-Brinnington, and Cheadle Heath-Brinksway areas.

A total of 77 children were treated during the year, and the following is an analysis of the various kinds of defects :—

Cleft Palate Speech	..	..	..	..	..	3
Dyslalia	..	..	..	..	..	39
Dysphonia and other voice disorders	..	..	..	..	..	6
Spastic	..	..	..	..	..	4
Stammering—left-handedness	..	..	..	..	..	3
„ ambidextrous	..	..	..	..	..	4
„ family history of left-handedness	..	..	..	..	..	3
„ family history of stammering	..	..	..	..	..	6
Mixed Speech Defects	..	..	..	..	..	9

77

24 children are not yet receiving treatment.

Generally progress towards a rectification of the speech defects has been satisfactory and 17 cases have been discharged as cured.

IX.—PROVISION OF MEALS AND MILK.

(a) School Meals Service.

Towards the end of the year the Booth Street Central Kitchen was closed, and its output was taken over by several smaller kitchens which were not working to full capacity. The premises were re-equipped as a dining hall for Our Lady's R.C. Schools.

A return to the Ministry of Education showed that on a given day in October, 55.7 per cent. of the pupils in attendance at Secondary Schools (Grammar and County), and 36.5 per cent. of pupils in attendance at Primary Schools, had school dinner at the canteens.

The actual numbers were :—

	No. present	No. who had school dinners
Secondary Schools (Grammar and County) ..	5,270	2,936
Primary Schools	14,069	5,138
Total ..	<u>19,339</u>	<u>8,074</u>

Of the 8,074 pupils who had dinners, 626 were necessitous children on the free list. On the same day, 33 necessitous children attended various canteens for breakfast.

All children in attendance at Nursery Schools and Special Schools have meals.

During the holiday periods throughout the year, arrangements were made to provide dinners for all children whose parents asked for them. Nine canteens were opened and children attended the one nearest their home.

(b) Milk in Schools Scheme.

All children of school age are entitled to participate in the Milk in Schools Scheme free of charge.

Every child can have a third of a pint of milk daily at his or her school during term time, and during school holidays children can have their milk each day at the canteens which are open for dinner.

A return to the Ministry of Education showed that on a given day in October, 54.8 per cent. of the pupils in attendance at Secondary Schools (Grammar and County) and 90.6 per cent. of the pupils in attendance at Primary Schools, received milk under the Scheme.

The actual figures were :—

	No. present	No. who received milk
Secondary Schools (Grammar and County) ..	5,270	2,897
Primary Schools	14,069	12,752
Total ..	19,339	15,649

Thanks are expressed to all Head Teachers and their staffs for their continued co-operation in the administration of these schemes which entail a substantial addition to the routine work in the schools.

X.—OPEN-AIR EDUCATION.

(a) The Longfield Open-Air School.

Children are admitted to this school on the recommendation of the School Medical Officers, the conditions for which admission is recommended being mainly debility, chronic ill health, nervousness, and physical handicaps of moderate degree. The school has large airy classrooms and extensive grounds, thus ensuring that the children have the opportunity of benefiting from an open air régime. The children rest for an hour after the midday meal either on camp beds or in comfortable chairs. During the summer months this rest period is held out of doors, weather permitting. There are only 91 pupils in attendance and so the teachers are able to get to know their pupils more intimately than is possible in an ordinary Day School. At the same time the children quickly get to know each other and lose their feeling of strangeness and loneliness.

Meals are prepared on the premises ; breakfast and dinner being provided. In addition each child receives two thirds of a pint of milk per day, part of which is given in a drink of hot cocoa at breakfast. The older children have a shower and the younger children a slipper bath each week unless excused on medical grounds. The primary object of these baths is not to ensure cleanliness but to tone up the body and stimulate the appetite.

The school is visited by a Medical Officer of the staff approximately once per week. Regular cleanliness inspections are carried out by the School Nurse.

XI.—PHYSICAL EDUCATION.

(a) Physical Activity.

During 1954, the Ministry of Education's new Syllabus of Physical Education, "Planning the Programme," was introduced to all primary schools and teachers attended refresher courses to study the many changes in activities and in teaching methods which the publication requires.

Modern climbing and agility apparatus was installed in two secondary schools and a new gymnasium was completed at Reddish Vale Secondary School.

(b) Remedial Training.

Remedial classes for primary posture and foot defects were continued in several schools and a survey of these classes showed that 323 children were cured and 54 had improved during the period September, 1952—February, 1954. During the year there were 14 classes for foot remedials and five for postural defects.

(c) Swimming.

The average attendance at the public baths for swimming instruction was 1,163.2 children per week during the schools' season, May—October, 1954. A record number of 2,838 Local Certificates was gained and of this total 2,060 were won by children for elementary standards not exceeding 60 yards.

(d) Open-Air Activities.

Organised games were restricted by consistently wet weather throughout the year, and the need for the provision of well-drained fields with adequate changing accommodation and toilet facilities was emphasised by the abnormal state of most playing fields.

The Authority's annual camp was held once more at Penmaenmawr and 179 children from four schools spent a week of their mid-summer holidays under canvas and near the sea. Seven schools held camps in different parts of the country and 332 children attended them during school holidays.

XII.—CO-OPERATION OF PARENTS, TEACHERS, SCHOOL ATTENDANCE OFFICERS AND VOLUNTARY BODIES.

(a) Co-operation of Parents.**(i) Attendance at the Periodic Medical Inspections.**

During the year 7,393 children were inspected at the Periodic Medical Inspections and parents were present at 4,465 of these inspections.

The number of parents attending with their children in the four age groups examined was as follows :—

	Number examined	Parents Present
School Entrants	2,460	2,297
Primary School Leavers	1,410	921
Secondary School Leavers ..	1,216	68
Other Periodic Inspections ..	2,652	1,684

The inspections classified as ' Other periodic inspections ' take place when the children are between the ages of seven and eight years. Bearing this in mind it will be observed from a perusal of the above figures that parental interest in the inspections diminishes progressively as the children get older. This is unfortunate as parental co-operation is required if the defects found at inspection are to be adequately corrected. For example the catarrhal child needs to be taught correct nasal hygiene and needs to be reminded frequently of the rules to follow, if lasting improvement is

to be made ; similarly children with postural defects should ideally carry out the remedial exercises at home each day, under the supervision of the parent. It is much more satisfactory if the doctor is able to discuss these matters with the parent at the time of examination rather than write about them.

(ii) Attendance at Consultation and Specialist Clinics.

The children seen at the Consultation Clinics by the School Medical Officers are brought either because the parents seek advice on some medical problem or because the School Medical Officers, having examined the children at school, wish to examine them further at the Clinic. In most cases they are accompanied by their parents. Children attending the Specialist Clinics must be accompanied by their parents, otherwise they may not be seen.

(b) Co-operation of Teachers.

(i) Medical and Dental Inspection.

The arrangements made for the Medical Inspection of pupils on school premises worked smoothly during the year ; thanks are due to the Head Teachers of the schools for their co-operation in this matter. Whenever possible a well heated room has been put at the disposal of the Medical Officer for the inspection. In some of the older schools the inspections have still to be carried out in a classroom which has been vacated for the purpose. Head Teachers or their representatives attend at the medical inspection in some schools and are able to furnish the Medical Officer with useful information at the time the children are being examined.

The co-operation of the Head Teachers has been greatly appreciated by the Dental Officers.

(ii) Following Up.

At the end of each medical inspection the Head Teacher is informed of the names of those pupils who have defects requiring attention. The Head Teachers are able to help in the following up of these children in such ways as ensuring that when glasses have been provided, they are worn each day by the children, that children with defective hearing are given a favourable position in class, and that children with valvular heart disease are either excluded from games or restricted in their activities. Thanks are due to the Head Teachers for their co-operation in this matter during the year.

(iii) Medical and Dental Treatment.

Thanks are due to the Head Teachers for ensuring that their pupils attend for treatment at the Clinics at the times arranged.

Certain periods of the day are set aside in the dental clinics for the examination and treatment of children without appointments, and Head Teachers inform the parents of these times. Children attending for dental treatment must bring with them their parents' written consent. All schools have a supply of the necessary consent forms.

(c) Co-operation of School Attendance Officers.

The Staff of the School Attendance Department continues to do valuable work, and close contact is maintained with this Department.

(d) Co-operation of Voluntary Bodies.

The Department is very much indebted to the various Voluntary Bodies for their work, and desires to place on record its appreciation.

(i) The G. W. Cookson Bequest.

The G. W. Cookson Bequest (vested in the Mayor of Stockport) provided an outing for poor children. Six hundred children were taken for a drive through Cheshire finishing at Lyme Hall, where tea was served, followed by sports. The Senior Welfare Officer organised the outing, and was assisted by the Staffs of the Central School Clinic and Education Department.

(ii) The Stockport Auxiliary of the Cripples' Help Society.

This organisation provided a visit to the Circus at Belle Vue in January and a day's outing to Fleetwood in the summer months, for cripples of the town, many of whom are children of school age.

(iii) The National Society for the Prevention of Cruelty to Children.

During 1954, 22 cases were referred to this Society for investigation and report. In addition, eleven cases were referred by the Education Department. There were no prosecutions during the year.

(iv) The Women's Voluntary Service.

The local branch of the Women's Voluntary Service has been most helpful in providing items of clothing in cases where the plight of necessitous children has been brought to its notice.

XIII.—BLIND, DEAF, DEFECTIVE AND EPILEPTIC CHILDREN.

(a) Examinations of Children for a Disability of Mind as Prescribed by Regulation 2 (a) of the Reports to Local Authorities (Records) Regulations, 1945.

Recommendations :—

(i) Education in an ordinary school	..	..	..	..	53
(ii) Education in an ordinary school and referral to the Educational Psychologist	..	..	..	..	30
(iii) Education in an ordinary school with special educational treatment as					
An educationally subnormal pupil	..	..	..	2	
A maladjusted pupil					
(a) Without residential care	..	..	..	..	Nil
(b) With residential care	..	..	..	..	Nil
(iv) Education in a Special School for Educationally Subnormal pupils					
Day	..	..	..	..	13
Boarding	..	..	..	..	21
(v) Education in a special school for maladjusted children					
Day	..	..	..	..	Nil
Boarding	..	..	..	..	1

(vi) Education in a Special school for another category of handicapped pupils, e.g. blind, deaf, epileptic, etc.							
Day	..	..	..	..	..	..	Nil
Boarding	..	..	..	..	..	..	6
(vii) Report to the Local Authority for the purposes of the Mental Deficiency Acts under							
Subsection 3..	..	..	..	..	..	..	1
Subsection 5..	..	..	..	..	..	..	2
of Section 57 Education Act, 1944							
(viii) Other recommendations							40
							<hr/> 169 <hr/>

In addition :—

1 boy, due to leave a Voluntary Primary School was re-examined.
 1 girl, due to leave a Voluntary Primary School was re-examined.
 1 girl, due to leave a Voluntary Primary School was re-examined
 and recommended for Non-Statutory Supervision.

2 girls, due to leave County Primary Schools were re-examined.

1 girl, due to leave a County Primary School was re-examined and
 recommended for Non-Statutory Supervision.

2 boys, due to leave County Secondary Schools were re-examined.

4 boys, due to leave County Secondary Schools were re-examined and
 recommended for Non-Statutory Supervision.

3 girls, due to leave County Secondary Schools were re-examined
 and recommended for Non-Statutory Supervision.

2 girls, due to leave Voluntary Secondary Schools were re-examined
 and recommended for Non-Statutory Supervision.

1 boy, due to leave Taxal Lodge Special Residential School was
 re-examined and recommended for Non-Statutory Supervision.

1 girl, due to leave Allerton Priory R.C. Special Residential School
 was re-examined and recommended for Non-Statutory Supervision.

1 boy, already notified, was re-examined at the request of one of the
 Authorised Officers and recommended for Institutional Care.

1 girl, due to leave a Voluntary Secondary School was re-examined
 and referred to the Department of Neurology, Manchester Royal
 Infirmary.

1 adult male was examined at Calderstones Institution at the request
 of the Medical Officer of Health.

1 adult female was examined at Calderstones Institution at the request
 of one of the Authorised Officers.

1 adult female, an in-patient in Stepping Hill Hospital was examined
 at the request of the Medical Officer of Health.

1 adult female, an in-patient in Stepping Hill Hospital was examined
 at the request of the County Medical Officer, Derbyshire.

3 adult females were examined at the request of one of the Authorised
 Officers.

2 adult females were examined at the request of one of the Authorised
 Officers and recommended for Institutional Care.

(b) Admissions to Special Residential Schools and Hospitals.**(i) Blind and Partially Sighted Pupils.**

2 boys were admitted to The Sunshine Home Nursery School for Blind Children, Southport.

1 girl was transferred from The Summerhill Grange Sunshine Home Nursery School for Blind Children, Kingswinford, Staffordshire, to The Sunshine Home Nursery School for Blind Children, Southport, and, later in the year, returned to Kingswinford.

(ii) Deaf and Partially Deaf Pupils.

1 boy was discharged from The Royal Residential Schools for the Deaf, Old Trafford, Manchester.

Later in the year the parents of one boy already at The Royal Residential Schools for the Deaf removed from Stockport and financial responsibility was transferred to the new Authority.

2 girls were discharged from The St. John's Roman Catholic Institution for the Deaf, Boston Spa, Yorkshire.

(iii) Delicate and Physically Handicapped Pupils.

2 boys were admitted to, and 2 boys were discharged from The St. Catherine's Home, Ventnor, Isle of Wight.

3 boys and 1 girl were admitted to, and 1 boy and 2 girls were discharged from The Convalescent Home for Physically Handicapped Children, West Kirby, Cheshire.

1 boy was admitted to, and later discharged from The Hamilton House School of Recovery, Seaford, Sussex.

1 boy was admitted to The Coney Hill Home for Crippled Children, Margate, Kent.

1 boy and 1 girl were admitted to The Bethesda Home for Crippled Children, George Street, Broughton, Salford, 8, Lancashire.

1 girl was admitted to The Pawling Home Hospital for Children, Barnet, Middlesex.

7 boys and 9 girls were admitted to, and 6 boys and 3 girls were discharged from The Children's Orthopaedic Hospital, Dale Road, Marple, Cheshire.

(iv) Educationally Subnormal Pupils.

1 boy was admitted to, and 1 boy was discharged from Pontville Roman Catholic School, Ormskirk, Lancashire.

1 girl was admitted to, and 1 girl was discharged from Allerton Priory Roman Catholic School, Liverpool.

1 girl was transferred from Springhill School, Ripon, to High Close, Wokingham.

3 girls were admitted to The Beechwood Boarding School, Gassendale, Liverpool.

2 girls were admitted to The Pield Heath House Roman Catholic School, Hillingdon, Middlesex.

2 girls were admitted to Orton Hall School, Peterborough, Lincolnshire.

5 girls were admitted to Maristow House School, Plymouth, Devon.

1 girl was admitted to Gorton Special Day School, Manchester.

7 boys were admitted to, and 8 boys were discharged from The Taxal Lodge Special Residential School, Whaley Bridge, Derbyshire.

(v) Epileptic Pupils.

2 boys were admitted to The Lingfield School for Epileptics, Lingfield, Surrey.

1 girl was admitted to The Colthurst House School (David Lewis Colony), Warford, Cheshire.

XIV.—FULL-TIME COURSES OF SECONDARY EDUCATION FOR BLIND, DEAF, DEFECTIVE AND EPILEPTIC STUDENTS.

(a) General.

There were no admissions or discharges during the year.

XV.—SPECIAL SCHOOLS.

(a) Longfield Open Air School, Mauldeth Road, Heaton Mersey.

Accommodation	92
Number on Roll	91
Percentage Attendance	78.3

Number of children discharged during the year :—

	<i>Boys</i>	<i>Girls</i>	<i>Total</i>
Group I—Cured	4	6	10
Group II—Much Improved	13	12	25
Group III—Improved	12	14	26
Group IV—Admitted to Residential Schools	4	4	8
Group V—Withdrawn by parents	—	—	—
Group VI—Left the district	—	—	—
	33	36	69

General Classification of defects at end of Autumn Term :—

	<i>Boys</i>	<i>Girls</i>	<i>Total</i>
Asthma	7	6	13
Bronchitis	6	3	9
Bronchiectasis	2	—	2
Debility	14	11	25
Delicate	8	7	15
Epilepsy	—	1	1
Heart Disease (Congenital)	2	—	2
Heart Disease (Rheumatic)	2	1	3
Maladjusted	1	1	2
Nervous Debility	4	4	8
Petit Mal	—	1	1
Paresis of limbs following poliomyelitis	2	1	3
Rheumatic carditis	—	1	1
Spastic Paralysis	—	1	1
Subnormal physical development	1	4	5
	49	42	91

77 children had a dental inspection and 51 were referred for treatment.

(b) Taxal Lodge Special Residential School for Educationally Subnormal Pupils, Whaley Bridge, Derbyshire.

Number on Roll 43 boys
 Seven boys were admitted to the school during the year.
 Eight boys were discharged from the school during the year.
 43 children had a dental inspection and 27 were referred for treatment.

(c) Special Class at St. Peter's C.E. School.

This Special Class is within the precincts of the St. Peter's C.E. Voluntary Primary School. In December, 1952, the Primary School was closed and the children dispersed to other schools. The result is that this Special Class is the only part of the school remaining in the present building.

Number on Roll 30
 I.Q. Range 55%—85%
 30 children had a dental inspection and 24 were referred for treatment.

XVI.—NURSERY SCHOOLS.

The numbers of children accommodated at the Nursery Schools are shown below :—

Reddish Vale:	Reddish Vale Road	..	From two to five years	..	80
Edgeley :	Hollywood Park School	..	From two to five years	..	40
Portwood :	Avenue Street	..	From two to five years	..	40
Adswood :	Arnfield Road	..	From two to five years	..	40
Belmont :	Grafton Street	..	From two to five years	..	40

XVII.—HIGH SCHOOLS AND OTHER INSTITUTIONS OF SECONDARY EDUCATION.**(a) Medical Inspection.**

The Local Education Authority maintains five Secondary Schools of the Grammar School type and five Secondary Schools of the County type, and a Secondary Technical School at Pendlebury Hall.

An annual Periodic Medical Inspection is carried out at these schools, the pupils being examined in their 15th year and annually thereafter if they remain at school. All pupils found to have defects are re-examined at school from time to time. Details of the number of pupils who were examined at these schools during the year are as follows :—

Stockport School..	..	..	..	..	..	377
Fylde Lodge High School	..	..	..	..	..	88
Greek Street High School	..	..	..	..	..	129
Stockport High School	..	..	..	..	..	145
Stockport College (Junior Commercial Class)	..	..	..	..	..	50
Avondale County Secondary School	..	..	..	..	..	159
Belmont County Secondary School	..	..	..	..	..	117
Dialstone County Secondary School	..	..	..	..	..	103
Reddish Vale County Secondary School	..	..	..	..	..	137
St. George's C.E. Voluntary Secondary School	..	..	..	..	..	122

Total 1,427

(b) Dental Inspection.

Dental Inspections were carried out at the following schools during 1954 :—

	Number inspected	Number referred for treatment
Stockport School	741	457
Stockport High School	404	150
Fylde Lodge High School	328	102
Greek Street High School	305	119
Stockport Secondary Technical School	197	118
Avondale County Secondary School	650	465
Belmont County Secondary School	649	477
Dialstone County Secondary School	689	396
Reddish Vale County Secondary School	604	418
St. George's C.E. Voluntary Secondary School	305	235
	<u>4,872</u>	<u>2,937</u>

(c) Following Up and Medical Treatment.

All pupils in whom defects are discovered are referred for the necessary treatment and are re-inspected each time the School Medical Officer visits the school.

XVIII.—MISCELLANEOUS.**(a) Youth Employment Bureau and the School Health Service.**

The Supervisor of the Youth Employment Bureau reports as follows :—

(i) School Leaving Cards.

The co-operation of the School Medical Officers in reporting on the unsuitability of specific forms of employment for certain school leavers as disclosed by school examination is much valued, and young people reported by the School Medical Service and found by the Bureau officers to be seriously handicapped by physical or mental disabilities are encouraged to register under the Disabled Persons (Employment) Act, 1944.

(ii) Medical Certificates.

2 Medical Certificates were issued under the "Employment of Children in Entertainments Rules, 1933."

(iii) Employment of Children.

Street Trading and Employment of Children.—No proceedings were instituted during the year.

Employment of School Children.—334 Medical Certificates were issued during the year.

(b) Medical Examination of Entrants to Courses of Training for Teaching and to the Teaching Profession.

The medical examination of teachers and of those entering the teaching profession continues to be carried out by the Medical Officers on the staff of the School Health Service. Each candidate is required to have an X-ray of the chest to exclude the presence of tuberculosis. These X-rays have been carried out under arrangements made with the Stockport Mass Miniature Radiography Unit.

In this connection 82 candidates for entry into Training Colleges and 5 prospective teachers were examined during the year.

XIX—STATISTICAL TABLES

MEDICAL INSPECTION RETURNS

Year ended 31st December, 1954

TABLE I.

**Medical Inspection of Pupils attending Maintained
Primary and Secondary Schools
(Including Special Schools)**

A.—PERIODIC MEDICAL INSPECTIONS

Number of Inspections in the Prescribed Groups:	Year	1953	1954
Entrants .. .. .	..	2,129	2,460
Second Age Group .. .. .	..	1,724	1,410
Third Age Group .. .. .	..	1,290	1,216
	Total ..	5,143	5,086
Number of other Periodic Inspections .. .. .	..	2,250	2,652
	Grand Total	7,393	7,738

B.—OTHER INSPECTIONS

Number of Special Inspections	..	..	..	5,846	5,416
Number of Re-Inspections	..	..	..	10,159	8,447
			Total	<u>16,005</u>	<u>13,863</u>

C.—PUPILS FOUND TO REQUIRE TREATMENT

Number of individual pupils found at Periodic Medical Inspection to require treatment (excluding Dental Diseases and Infestation with Vermin).

<i>Group</i>	<i>For defective vision (excluding squint)</i>	<i>For any of the other conditions recorded in Table IIA</i>	<i>Total individual pupils</i>
(1)	(2)	(3)	(4)
Entrants	11	586	597
Second Age Group	46	186	232
Third Age Group	50	104	154
Total (prescribed groups)	107	876	983
Other Periodic Inspections	133	375	508
Grand Total ..	240	1,251	1,491

MEDICAL INSPECTION RETURNS

TABLE II

A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION
IN THE YEAR ENDED 31st DECEMBER, 1954

Defect Code No.	Defect or Disease	PERIODIC INSPECTIONS		SPECIAL INSPECTIONS	
		No. of defects		No. of defects	
		Requiring treatment	Requiring to be kept under observation, but not requiring treatment	Requiring treatment	Requiring to be kept under observation but not requiring treatment
	(1)	(2)	(3)	(4)	(5)
4	Skin	80	225	412	—
5	Eyes—				
	a. Vision ..	240	746	151	25
	b. Squint ..	53	422	4	3
	c. Other ..	37	101	99	—
6	Ears—				
	a. Hearing ..	86	220	7	5
	b. Otitis Media	17	101	8	—
	c. Other ..	36	81	50	4
7	Nose or Throat ..	262	1,186	527	3
8	Speech	40	129	8	—
9	Cervical Glands	4	165	10	1
10	Heart and Circulation	18	338	4	5
11	Lungs	22	364	18	2
12	Developmental—				
	a. Hernia ..	11	40	—	—
	b. Other ..	15	82	—	—
13	Orthopædic— ..				
	a. Posture ..	82	264	11	1
	b. Flat foot ..	252	228	5	—
	c. Other ..	98	377	51	1
14	Nervous system				
	a. Epilepsy ..	—	13	—	—
	b. Other ..	2	24	—	—
15	Psychological—				
	a. Development	49	140	—	2
	b. Stability ..	88	348	7	2
16	Other	138	726	1,605	12

MEDICAL INSPECTION RETURNS

B.—CLASSIFICATION OF THE GENERAL CONDITION OF PUPILS INSPECTED DURING THE YEAR IN THE AGE GROUPS.

Age Groups	No. of Pupils Inspected	A. (Good)		B. (Fair)		C. (Poor)	
		No.	% of col. 2	No.	% of col. 2	No.	% of col. 2
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Entrants	2,460	389	15.81	2,042	83.01	29	1.18
2nd Age Group ..	1,410	311	22.06	1,076	76.31	23	1.63
3rd Age Group ..	1,216	273	22.45	937	77.06	6	.49
Other Periodic Inspections ..	2,652	646	24.36	1,977	74.55	29	1.09
Total ..	7,738	1,619	20.92	6,032	77.95	87	1.13

TABLE III

Infestation with Vermin

- (i) Total number of examinations in the schools by the school nurses or other authorised persons 82,785
- (ii) Total number of individual pupils found to be infested 1,472
- (iii) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944).. .. . 9
- (iv) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944).. .. . —

TABLE IV.
TREATMENT OF PUPILS ATTENDING MAINTAINED PRIMARY
AND SECONDARY SCHOOLS (INCLUDING SPECIAL SCHOOLS)

GROUP 1.—Diseases of the Skin (excluding uncleanliness, for which see Table III).

	Number of cases treated or under treatment during the year	
	By the Authority	Otherwise
Ringworm—(i) Scalp	—	—
(ii) Body	1	—
Scabies	8	—
Impetigo	284	—
Other skin diseases	300	—
Total ..	593	—

GROUP 2.—Eye Diseases, Defective Vision and Squint.

	Number of cases dealt with	
	By the Authority	Otherwise
External and other, excluding errors of refraction and squint	236	—
Errors of Refraction (including squint) ..	915	—
Total ..	1,151	—
Number of pupils for whom spectacles were		
(a) Prescribed	459	—
(b) Obtained	403	—

GROUP 3.—Diseases and Defects of Ear, Nose and Throat.

	Number of cases treated	
	By the Authority	Otherwise
Received operative treatment		
(a) for diseases of the ear	—	7
(b) for adenoids and chronic tonsillitis	—	380
(c) for other nose and throat conditions	—	66
Received other forms of treatment ..	111	—
Total ..	111	453

TABLE IV—*continued.*

GROUP 4.—Orthopædic and Postural Defects.

(a) Number treated as in-patients in hospitals	18	
	By the Authority	Otherwise
(b) Number treated otherwise, <i>e.g.</i> , in clinics or out-patient departments..	—	39

GROUP 5.—Child Guidance Treatment.

	Number of cases treated	
	In the Authority's Child Guidance Clinics	Elsewhere
Number of pupils treated at Child Guidance Clinics	—	7

GROUP 6.—Speech Therapy.

	Number of cases treated	
	By the Authority	Otherwise
Number of pupils treated by Speech Therapists	77	7

GROUP 7.—Other Treatment Given.

	Number of cases treated	
	By the Authority	Otherwise
(a) Miscellaneous minor ailments ..	2,286	—
(b) Other (specify)		
1 Audiometric Tests	152	—
2 Chiropody	226	—
Total ..	2,664	—

MEDICAL INSPECTION RETURNS.

TABLE V.—DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY.

(1) Number of pupils inspected :—										
(a) Periodic Age-Groups.										
AGE	4	5	6	7	8	9	10	11		
CLEARs	70	317	452	429	379	346	452	685		
DEFECTIVES ..	135	727	1131	1349	1330	1062	1082	1011		
TOTALS ..	205	1044	1583	1778	1709	1408	1534	1696		
AGE	12	13	14	15	16	17	18			Total
CLEARs ..	474	422	429	321	135	55	17			4,983
DEFECTIVES	982	828	853	547	82	13	10			11,142
TOTALS ..	1456	1250	1282	868	217	68	27			16,125
(b) Specials										
(c) TOTAL (Periodic and Specials)										
(2) Number found to require treatment										
(3) Number offered treatment										
(4) Number actually treated										
(5) Attendances made by pupils for treatment										
(6) Half-days devoted to :—										
Inspection										
Treatment										
Total ..										
(7) Fillings :—										
Permanent teeth ..										
Temporary teeth ..										
Total ..										
(8) Number of teeth filled :—										
Permanent teeth ..										
Temporary teeth ..										
Total ..										
(9) Extractions :—										
Permanent Teeth ..										
Temporary Teeth ..										
Total ..										
(10) Administration of general anæsthetics for extraction										
(11) Other operations :—										
Permanent teeth ..										
Temporary teeth ..										
Total ..										
(12) Administration of Local Anæsthetics for Extraction ..										
(13) Orthodontic Work :—										
Impressions taken ..										
Bands made ..										
Appliances Inserted										
Inspection and Adjustment ..										
(14) Prosthetic Work :—										
Partial dentures inserted										